

U12000081784

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

51356

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H120001641573)))



H120001641573ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2012 JUN 20 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**FLORIDA LIMITED LIABILITY CO.
M & J ENTERPRISES SOUTHEAST, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
12 JUN 20 PM 3:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T CLINE
JUN 21 2012
EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

FILED 2012 JUN 20

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

M & J ENTERPRISES SOUTHEAST, LLC

ARTICLE II - ADDRESS OF LIMITED LIABILITY COMPANY

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THE LIMITED LIABILITY COMPANY IS:

9100 PENELOPE DRIVE
BROOKSVILLE, FLORIDA 34613

ARTICLE III - REGISTERED AGENT AND OFFICE

THE NAME OF THE REGISTERED AGENT AND THE STREET ADDRESS OF REGISTERED OFFICE OF THE LIMITED LIABILITY COMPANY IS:

MARLENE A. VIERECK
9100 PENELOPE DRIVE
BROOKSVILLE, FLORIDA 34613

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN CHAPTER 608, FLORIDA STATUTES.

DATED: 6-20-12

X Marlene A. Viereck
MARLENE A. VIERECK

ARTICLE IV - MANAGEMENT

THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER IS AS FOLLOWS:

MANAGER/MEMBER: JAMES M. VIERECK
9100 PENELOPE DRIVE
BROOKSVILLE, FLORIDA 34613

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 JUN 20 AM 8 11

FILED

FILED 2012 JUN 20

H12000164157

MARLENE A. VIERECK
9100 PENELOPE DRIVE
BROOKSVILLE, FLORIDA 34613

DATED: 6-20-12

Marlene A. Viereck
MARLENE A. VIERECK

IN ACCORDANCE WITH SECTION 608.408(3), FLORIDA STATUTES, THE
EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES
OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

FILED

2012 JUN 20 AM 9 11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA